ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar	number, and address):		FOR COURT USE ONLY
TELEPHONE NO.:	FAX NO.:		
ATTORNEY FOR (Name):			
NAME OF COURT:			
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
PLAINTIFF/ PETITIONER:			
DEFENDANT/ RESPONDENT:			
CIVIL SUBPOENA (DUCES TEC	JM) for Personal An	pearance	CASE NUMBER:
and Production of Documents a	nd Things at Trial o		
THE PEOPLE OF THE STATE OF CALIFOR	NIA, TO (name, addre	ss, and telephone n	umber of witness, if known):
	, - (,		,
1. YOU ARE ORDERED TO APPEAR AS A	WITNESS in this action	on at the date, time, a	and place shown in the box below
UNLESS your appearance is excused a	s indicated in box 3b	below or you make a	n agreement with the person named in
item 4 below.			
	ïme:	Dept.:	Div.: Room:
b. Address:			
UNDER CODE OF CIVIL PROCEDURE S BEEN SERVED ON YOU, A COURT ORD EMPLOYEE AFFECTED MUST BE OBTA RECORDS.	ER OR AGREEMENT	OF THE PARTIES, W	ITNESSES, AND CONSUMER OR
3. YOU ARE (item a or b must be checked):			
	to produce the records	described in the decla	aration on page two or the attached
	•		ified witness and the production of the
•	nis subpoena. The proc	edure authorized by E	vidence Code sections 1560(b), 1561, and
	•	•	declaration on page two or the attached
	• •		in compliance with Evidence Code sections
` '	•		r other wrapper). Enclose the original
	· ·		opy of this subpoena to the envelope or
		,	me, and place from item 1 in the box above
(3) Place this first envelope in an	outer envelope, seal it,	and mail it to the clerk	of the court at the address in item 1. (4)
Mail a copy of your declaration to	the attorney or party lis	sted at the top of this f	orm.
4. IF YOU HAVE ANY QUESTIONS ABOUT THAT YOUR PRESENCE IS REQUIRED,			
TO APPEAR:		h Tolonk	oone number:
a. Name of subpoenaing party or attorney:5. Witness Fees: You are entitled to witness	food and mileago actus	•	none number:
at the time of service. You may request the			
			·
DISOBEDIENCE OF THIS SUBPOENA MA FOR THE SUM OF FIVE HUNDRED DO			
Date issued:		\	
		/SIGNI/	ATURE OF PERSON ISSUING SUBPOENA)
(TYPE OR PRINT NAME)		(SIGIV)	TIONE OF I ENGOTE IOOOTHO OODF OLIVA)

(Declaration in support of subpoena on reverse)

(TITLE)

PLAINTIFF/PETITIONER:	CASE NUMBER:	
DEFENDANT/RESPONDENT:		
The production of the documents or the other things sought by the subpoena on page one the attached affidavit or declaration the following declaration:	is supported by (check one):	
DECLARATION IN SUPPORT OF CIVIL SUBPOENA (DUCES TE APPEARANCE AND PRODUCTION OF DOCUMENTS AND THINGS (Code Civ. Proc., §§ 1985,1987.5)		
1. I, the undersigned, declare I am the plaintiff defendant petition attorney for (specify): other (specify): other (specify):	oner respondent	
2. The witness has possession or control of the following documents or other things and specified in the <i>Civil Subpoena for Personal Appearance and Production of Documents</i> of this form (specify the exact documents or other things to be produced):		
Continued on Attachment 2.		
3. Good cause exists for the production of the documents or other things described in part	agraph 2 for the following reasons:	
Continued on Attachment 3.		
4. These documents or other things described in paragraph 2 are material to the issues in	evolved in this case for the following reasons:	
Continued on Attachment 4.		
I declare under penalty of perjury under the laws of the State of California that the foregoing	g is true and correct.	
Date:		
(TYPE OR PRINT NAME) (SIGNATURE OF	SUBPOENAING PARTY ATTORNEY FOR SUBPOENAING PARTY)	
Request for Accommodations Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available		

if you ask at least five days before the date on which you are to appear. Contact the clerk's office or go to www.courtinfo.ca.gov/forms for Request for Accommodations by Persons With Disabilities and Response (form MC-410). (Civil Code, § 54.8.)



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PLAINTIFF/PETITIONER:	CASE NUMBER:
DEFENDANT/RESPONDENT:	

PROOF OF SERVICE OF CIVIL SUBPOENA (DUCES TECUM)

(SIGNATURE)	(SIGNATURE)
)	•
Date:	Date:
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	(For California sheriff or marshal use only) I certify that the foregoing is true and correct.
 f Registered professional photocopier. g Exempt from registration under Business and Professi h. Name, address, telephone number, and, if applicable, county 	
d. Employee or independent contractor of a registered Contractor of a regis	
 3. Person serving: a. Not a registered California process server. b. California sheriff or marshal. c. Registered California process server. 	
2. I received this subpoena for service on (date):	
f. Fee for service:	
(2) were not demanded or paid.	_
(1) were offered or demanded and paid. Amount:	
e. Witness fees (check one):	
c. Date of delivery:d. Time of delivery:	
b. Address where served:	
 I served this Civil Subpoena (Duces Tecum) for Personal Appear and Declaration by personally delivering a copy to the person set a. Person served (name): 	
AND THINGS AT TRIAL OR H	

SUBP-002 [Rev. July 1, 2009]